## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04613

TEMPLE SHIR SHALOM OF GAINESVILLE, INC.

## FILED Apr 26, 2006 8:00 am Secretary of State

04-26-2006 90226 006 \*\*\*\*61.25

					O STATE				
Principal Place of Business TEMPLE SHIR SHALOM 3855 NW 8 AVE GAINESVILLE, FL 32605 US		Mailing Address TEMPLE SHIR SHALOM 3855 NW 8 AVE GAINESVILLE, FL 32605 US			128(1)21 EN 82(1) EN	BIR SYDI WASS (1)4 J	500165		
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			04212006 Ch	g-NP	CR2E037 (11/05)	
City & State			City & State		4. FEI Number 59-2483223	3 .		pplied For	
Zip Country		Zip	Zip Country		5. Certificate of Star	tus Desired	\$8.75 Ad	ditional	
	6. Name	and Address of Current	Registered Agent		ŀ	7. Name and Addre	ess of New Re	gistered Agent	
CAL ZRAAN	LANTHON	V 1		Name		-			
SALZMAN, ANTHONY J. 500 E. UNIVERSITY AVE., SUITE A GAINESVILLE, FL 32602-9759			Street Addres		s (P.O. Box Number is N	ot Acceptable)			
,				City				FL Zip Cox	te
	named entity tions of registe		or the purpose of changing	its register	ed office or regis	stered agent, or both, in th	ne State of Flori	da. I am familiar with	, and accept
SIGNATURE		r printed name of registered agent	and trile if applicable. (N	OTE: Registere	ed Ageni signature requ	ired when reinstating)		DATE	
						<u> </u>	· · · · · · · · · · · · · · · · · · ·		
Filing Fee Is \$61.25 Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution.		· -	\$5.00 May Be Added to Fees		ke check payable t la Department of S	
10.		OFFICERS AND DI	RECTORS 11.			ADDITIONS/CHANGE	S TO OFFICER	S AND DIRECTORS IN	J 10
TITLE	Р		☐ Delete	TETL	F			☐ Change	☐ Addition
NAME	BILSKY, S	TUART	□ Deicie	NAM				- Orango	MARILION
STREET ADDRESS	1114 SW 1				EET ADDRESS				
CITY-ST-ZIP	· -	Y, FL 326693105			(-ST-ZIP				
	V	11,11 320033103							
TITLE	'	N DADDY	☐ Delete	TITL	· I			☐ Change	Addition
NAME	JACOBSO			NAM	-				
STREET ADDRESS	1	7TH TERRACE			EET ADDRESS				
CITY-ST-ZIP	ļ	LLE, FL 32605		Cary	r-ST-ZIP				
TITLE	ļT		☐ Delete	TITL	E			☐ Change	Addition
NAME	RECKSEIT	, david		NAM	AE				
STREET ADDRESS	1								
	7804 SW 4	7TH COURT			EET ADORESS				
CITY-ST-ZIP	7804 SW 4	7TH COURT LLE, FL 32608			EET ADDRESS (-ST-ZIP				
	7804 SW 4		☐ Delete		r-ST-ZIP			Change	Addition
CITY-ST-ZIP	7804 SW 4 GAINESVII V SNYDER,	LLE, FL 32608 JAN	☐ Delete	CITY	(-ST-ZIP E	· · · · · · · · · · · · · · · · · · ·		Change	Addition
CITY-ST-ZIP TITLE	7804 SW 4 GAINESVII V	LLE, FL 32608 JAN	☐ Delete	CITY TITL NAM	(-ST-ZIP E			☐ Change	Addition
CITY-ST-ZIP TITLE NAME	7804 SW 4 GAINESVII V SNYDER, 3 7711 SW 1	LLE, FL 32608 JAN	☐ Delete	CITY TITL NAM STRI	/-ST-ZIP E AE			☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	7804 SW 4 GAINESVII V SNYDER, 3 7711 SW 1	JAN 03RD AVE	☐ Delete	CITY TITL NAM STRI	(-ST-ZIP  E  ME  EET ADDRESS (-ST-ZIP			☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	7804 SW 4 GAINESVII V SNYDER, 3 7711 SW 1	JAN 03RD AVE		CITY TITL HAM STRI CITY	(-SI-ZIP  E ME EET ADDRESS (-SI-ZIP E				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	7804 SW 4 GAINESVII V SNYDER, 3 7711 SW 1	JAN 03RD AVE		CITY TITL NAM STRI CITY TITL NAM	(-SI-ZIP  E ME EET ADDRESS (-SI-ZIP E				
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CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	7804 SW 4 GAINESVII V SNYDER, 3 7711 SW 1	JAN 03RD AVE	□ Delete	CITY TITL NAM STRI CITY TITL NAM STRI	(-ST-ZIP  E  EEET ADDRESS (-ST-ZIP  E  BEET ADDRESS (-ST-ZIP	M D T T T T T T T T T T T T T T T T T T			
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CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME  TITLE NAME	7804 SW 4 GAINESVII V SNYDER, 3 7711 SW 1	JAN 03RD AVE	□ Delete	CITY TITL NAM STRIT CITY TITL NAM STRIT CITY TITL NAM STRIT CITY TITL NAM	(-ST-ZIP  E  EEET ADDRESS (-ST-ZIP  E  BEET ADDRESS (-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E  EEET ADDRESS			☐ Change	☐ Addition
CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TITLE THE NAME	7804 SW 4 GAINESVII V SNYDER, 3 7711 SW 1	JAN 03RD AVE	□ Delete	CITY TITL NAM STRI CITY TITL NAM STRI CITY TITL NAM STRI CITY TITL NAM STRI NAM STRI	(-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E  BET ADDRESS (-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E			☐ Change	☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/23/06 352-317-34/7